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**FROM: Cheryl L. Martin (Typed or printed name of person signing Certificate)**

Fax No. 513-634-3499

Phone No. 513-634-1119

Application No.: 09/778,687

Inventor(s): Mark James Kline et al.

Filed: 7 February 2001

Docket No.: 8415

Confirmation No.: 5337

**FACSIMILE TRANSMITTAL SHEET AND**  
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Cheryl L. Martin (Signature)

Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Fee Transmittal
- 2) Notice of Appeal
- 3) Appeal Brief (16 pages)

Number of Pages Including this Page: 19

<b>FEE TRANSMITTAL</b> <b>for FY 2006</b> Patent fees are subject to annual revision. Effective December 8, 2004		<b>Complete if Known</b>																																					
		Application Number	09/778,687	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>																																			
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		First Named Inventor	Mark James Kline																																				
		Examiner Name	C. Lynne Anderson																																				
		Art Unit	3761																																				
<b>TOTAL AMOUNT OF PAYMENT (\$1000)</b>	Docket No. <b>8415</b>																																						
<b>METHOD OF PAYMENT</b> 1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		<b>FEE CALCULATION (continued)</b> 5. <b>ADDITIONAL FEES</b> <table border="0"> <thead> <tr> <th><b>Fee Description</b></th> <th><b>Fee Paid</b></th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1<sup>st</sup> month</td> <td>(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2<sup>nd</sup> month</td> <td>(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3<sup>rd</sup> month</td> <td>(\$1,020) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4<sup>th</sup> month</td> <td>(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5<sup>th</sup> month</td> <td>(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17(q) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) \$500</td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) \$500</td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		<b>Fee Description</b>	<b>Fee Paid</b>	Extension for reply within 1 <sup>st</sup> month	(\$120) <input type="checkbox"/>	Extension for reply within 2 <sup>nd</sup> month	(\$450) <input type="checkbox"/>	Extension for reply within 3 <sup>rd</sup> month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 <sup>th</sup> month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 <sup>th</sup> month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17(q) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) \$500	Filing a brief in support of an appeal	(\$500) \$500	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other:	<input type="checkbox"/>						
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3. <b>APPLICATION SIZE FEE:</b> Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) <b>SUBTOTAL (2)+(3) (\$1000)</b>																																							
4. <b>EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</b> <table border="0"> <thead> <tr> <th></th> <th><b>Extra</b></th> <th><b>Fee from</b></th> <th><b>Fee</b></th> </tr> <tr> <th></th> <th><b>Claims</b></th> <th><b>Below</b></th> <th><b>Paid</b></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td><input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p><b>Fee Description</b></p> <p>Claims in excess of 20 (\$50 per claim)</p> <p>Independent claims in excess of 3 (\$200 per claim)</p> <p>Multiple dependent claim, if not paid (\$360)</p> <p>**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)</p> <p>**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p><b>SUBTOTAL (4) (\$1000)</b></p>			<b>Extra</b>	<b>Fee from</b>	<b>Fee</b>		<b>Claims</b>	<b>Below</b>	<b>Paid</b>	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Multiple Dependent claims:	<input type="checkbox"/> = <input type="checkbox"/>			<b>SUBTOTAL(5) (\$1000)</b>																	
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<b>SUBMITTED BY</b>				Complete (if applicable)	
Name (Print/Type)	Michael P. Hayden	Registration No. (Attorney/Agent)	48,433	Telephone	(513) 634-5801
Signature	<i>Michael P. Hayden</i>			Date	3 Aug 2006

+ This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT